

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of)

Miller and Lorbeck)

Serial No. 09/651,820)

Filed: August 30, 2000)

For: APPARATUS FOR PERFORMING
DOPPLER CORRECTION IN A
WIRELESS COMMUNICATIONS
SYSTEM

Group No. 2683

RECEIVED

FEB 17 2004

Technology Center 2600

AMENDMENTCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated August 5, 2003, the time for responding
having been extended until February 5, 2004, please amend the above-identified application
as follows:

02/12/2004 SSITHIB1 00000146 09651820

02 FC:1201 258.00 DA

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with the United States Postal Service
with sufficient postage as first class mail, in an
envelope addressed to the Commissioner for
Patents, P.O. Box 1450, Alexandria, VA 22313-
1450.

Depositor's Name: Stacy Dumrauf
(type or print name)Date: February 5, 2004

FACSIMILE

- ☐ transmitted by facsimile to the Patent and
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Signature: _____

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AMENDMENT TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: PA876
In Re Application of: Miller et al.
Serial Number: 09/651,820
Filed: August 30, 2000
Examiner: Stephen M. D'Agosta
Group Art Unit: 2683

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FEB 17 2004

Technology Center 2600

Dear Sir:

Transmitted herewith for filing is a Response to Office Action w/three-month ext. of time in the above identified application.

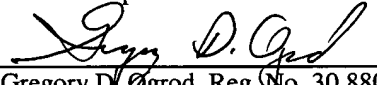
CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	20	20	0	x \$18 =	\$0
Independent**	6	3	3	x \$86 =	\$258
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0
EXTENSION FEES				<input type="checkbox"/> One Month	\$110
				<input type="checkbox"/> Two Months	\$420
				<input checked="" type="checkbox"/> Three Months	\$950
TERMINAL DISCLAIMER				\$110	\$0
				TOTAL FEE	\$1208

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$ _____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1208.
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: February 5, 2004

Signature: Gregory D. Ogrod, Reg. No. 30,880
(858) 658-3617QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

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Depositor's Name: Stacy Dumrauf
(type or print name)

Date: February 5, 2004

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Depositor's Name: _____
(type or print name)Signature: 